

IS-04-F-2

**PARENT/GUARDIAN/ADULT STUDENT CONSENT  
FOR FIELD TRIP/EXCURSION**

To be completed by the parent/guardian/adult student for all field trips/excursions and returned to the school.

School: Northlake Woods Public School

Field Trip Destination: Montreal

Field Trip Date(s): June 27th to June 29th, 2010

**Element of Risk:** The risk of injury exists in every field trip activity. However, due to the very nature of some activities, the risk of injury may increase. Injuries may range from minor sprains and strains to more serious injuries. The safety and well-being of students is a prime concern and attempts are made to manage as effectively as possible, the foreseeable risks inherent in field trip activities.

**Medication:** If it will be necessary for your child to take prescription medication during the trip, the parent/guardian must complete the form *Administration of Medication* (IS-98-00). It must be forwarded to the Principal prior to the administration of medication. (\*If your child currently receives medication during the school day and a copy of this form is on file at the school, it is not necessary to complete another form.)

**I have read and understood the information on the *Field Trip/Excursion Information for Parent Form* (IS-04-F-1).**

\_\_\_\_\_ has my permission to participate in this field trip/excursion.  
(Student's Name)

**NOTE:** If volunteers are required, please check if you are able to assist.

\_\_\_\_\_ I can supervise on the excursion.

\_\_\_\_\_ I can drive \_\_\_\_\_ students.  
number

If volunteer drivers are used, I give permission for my son/daughter to travel with a responsible volunteer driver. \_\_\_\_\_ (please check)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian/Adult Student